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STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF THE COMMISSIONER

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October 4, 2022

The Honorable Karen Umberger, Chairman  
Fiscal Committee of the General Court and

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, NH 03301

**REQUESTED ACTION**

Pursuant to the provisions of RSA 14:30-a, VI, authorize the Department of Health and Human Services, to accept and expend federal funds from the American Rescue Plan Act (ARPA) State Fiscal Recovery Funds (SFRF), in the amount of \$1,800,000 to transform the current manual process for recording and acting on incidents being reported implementing an automation strategy utilizing Salesforce to enable web based submittals to automate responses and assignments, to improve service outcomes and operational effectiveness across all divisions of the department. The costs are based on leveraging eight contractors working for a year under DoIT to direct and manage the solution, effective upon approval by the Fiscal Committee and Governor and Council through June 30, 2023, and further authorize the allocation of these funds in the accounts below. This is an allowable use of ARPA SFRF funds under Section 602(c)(1)(A), to respond to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19) or its negative economic impacts. 100% Federal Funds.

**05-95-94-940010-2465 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SERVICES, HHS: NEW HAMPSHIRE HOSPITAL, ARPA DHHS FISCAL RECOVERY FUND**

<sup>1</sup> All direct program costs will be accounted for using activity 00FRF602PH9538A and all administrative and indirect costs will be accounted for using activity 00FRF602PH9538Z. Accounting classifications may be subject to technical changes at the discretion of the Department of Administrative Services' Division of Accounting Services.

<b>CLASS OBJ</b>	<b>CLASS TITLE</b>	<b>Current Modified Budget</b>	<b>Increase/ (Decrease) Amount</b>	<b>Revised Modified Budget</b>
000-400338-16	Federal Funds	\$ 69,038,168	\$ 1,800,000	\$ 70,838,168
	General Fund	\$ -	\$ -	\$ -
	<b>Total Revenue</b>	<b>\$ 69,038,168</b>	<b>\$ 1,800,000</b>	<b>\$ 70,838,168</b>
010-500100	Personal Services Perm Class	\$ 122,104		\$ 122,104
020-500200	Current Expenses	\$ 250,001	\$ -	\$ 250,001
022-500255	Rents-Leases other than State	\$ 3,891,727		\$ 3,891,727
030-500301	Equipment New/Replacement	\$ 1	\$ -	\$ 1
040-500800	Indirect Costs	\$ 2,123,973		\$ 2,123,973
041-500801	Audit Fund Set Aside	\$ 62,805	\$ 1,800	\$ 64,605
042-500620	Additional Fringe Benefits	\$ 8,733		\$ 8,733
046-500462	Consultants	\$ 1		\$ 1
047-500240	Own Forces Maintenance (Bldg-Grnd	\$ 1		\$ 1
048-500226	Contract Repairs: Bldg, Grounds	\$ 1		\$ 1
050-500109	Personal Services Temp	\$ -		\$ -
059-500117	Temp Full Time	\$ 98,133		\$ 98,133
060-500601	Benefits	\$ 119,996		\$ 119,996
072-502683	Grants Federal	\$ 250,000		\$ 250,000
102-500731	Contracts for Program Services	\$ 50,364,360	\$ -	\$ 50,364,360
103-502507	Contracts for Operational Services	\$ 11,746,332	\$ 1,798,200	\$ 13,544,532
	<b>Total Expenses</b>	<b>\$ 69,038,168</b>	<b>\$ 1,800,000</b>	<b>\$ 70,838,168</b>

### EXPLANATION

The State has experienced unprecedented pressure on its existing workforce, seeing staff shortages across agencies and increased wage competition with the private sector, as the negative effects of the COVID-19 health crisis continue to unfold. This reality has forced State agencies to attempt to operate with a high number of vacancies and find other means to adapt in order to achieve core responsibilities and required outcomes or deliverables.

This has resulted in the development of the State Workforce Efficiency Enhancement Program (SWEEP), an initiative focused on one-time investments in technology, systems, or other tools that will make it easier for State agencies to perform required functions over the long term as they adjust their roles and needs to the realities brought on by the pandemic and move toward a more sustainable staffing model that helps avoid burnout and encourages retention. This request is part of the overarching SWEEP effort.

The Department is requesting to accept and expend \$1,800,000 for the purpose of contracting with CAI to hire the resources necessary to create an Incident Management System leveraging the Salesforce platform. The plan will be to hire a team of Salesforce specialists to configure an incident management system to replace current manual processes and allow for critical staff to focus on delivering services. The team will consist of a Salesforce Team Lead, a Salesforce Architect, three Salesforce Senior Developers,

two Salesforce Developer, and a trainer. Based on the existing contract with CAI the anticipated costs for these eight individuals for one year will be \$1,800,000.

This solution will create standard portals both for internal State of New Hampshire employees as well as external for providers and individuals as applicable to submit requests or incidents to the department. The system will achieve this through complex workflow automations built into the system to allow for improved response times, trend analysis reporting, better understanding of what individuals are experiencing and the ability to make informed decisions on how to improve services, respond to incidents and train staff accordingly. This system will be focused initially on providing a solution for three different areas within the Department and will be designed to be able to scale out to other areas in the department with minimal expense. The first three areas are Division for Children, Youth and Families, Division of Public Health Services and New Hampshire Hospital. This implementation will create the foundation for incident management at the department and will be able to be scaled out to support incident management for the department, below is a brief description for the first three solutions to be implemented using these funds.

- Division for Children, Youth and Families

- The Division believes safety is paramount in all activities. The culture of safety extends beyond those children, youth, and families that we serve to include victims, communities, and employees. Through an organized and informed practice, the Division strives to track all incidents that put the safety of children, youth, families, and staff at risk, or in which there has been harm to be able to advocate for a continuous quality improvement approach to improving outcomes and safety for all. The Division, in partnership with the Division for Behavioral Health (DBH) currently works with over 70 residential providers of which the focus of this project will be 44 with the goal to extend to the entire group after successful proof of concept.
- Each of the providers are required to submit critical incident reports to DCYF following a guideline. Once submitted, the department sends the information over to the Office of Child Advocate. This process is currently very time intensive and manual requiring multiple data entry points that leave room for error in processing. The goal will be to implement a provider incident reporting system that would be able to provide an external facing web portal for our providers to submit and/or interface to in order to provide the incident reports in a system that can then be reported to OCA with minimal re-work or additional data entry. Ideally a provider dashboard will be included so that both external providers and internal state users can analyze data and create their own reports.

- Division for Public Health Services

- The Immunization Information Services bureau implemented a secure, statewide, web-based system that connects and shares immunization information among public clinics, private provider offices, local health departments, schools, hospitals, and other health care facilities that administer immunizations and provide medical care to New Hampshire residents during the pandemic. In order to support the 330 health care providers and approximately 5,000 users accessing the system the Division needs to implement a web based solution to manage the inquiries receive by the providers as well as manage the

requests by individuals in the state associated with their immunization record, opt-out and withdrawal requests.

- New Hampshire Hospital (NHH)
  - Occurrence reporting at New Hampshire Hospital (NHH) needs to be moved from paper to electronic submissions in order to facilitate trend analysis, reporting, accurate tracking and quality assurance. Having an electronic occurrence reporting system will meet Joint Commission requirements and keep NHH from being out of compliance with their auditors.

Ongoing costs associated with the incident management system will be managed between DHHS and DoIT for support as well as ongoing Salesforce licensing for the department included in current operations budget projections for current and future fiscal years.

Without this funding to support the automation of administrative efforts currently managed manually in each area the individuals served would continue to experience delays in services. Additionally, due to our current workforce shortages the need for such automation is even more critical to reduce the burden on the current workforce in place and allow for other efforts to include recruitment efforts to be addressed.

Funds are budgeted as follows:

- Class 041 – RSA 124:16 requires .1% to be budgeted to pay for financial and compliance audits.
- Class 103 – The funds will be used to pay for contracted services.

Source of Funds: These funds are 100% Federal Funds.

Respectfully submitted,



Lori A. Shibinette  
Commissioner